

ATZG-PA

MEMORANDUM FOR All Activities Utilizing Nonappropriated Fund at Fort Monroe

SUBJECT: Letter of Instructions For On-The-Job Injuries and Workers' Compensation Benefits For Nonappropriated Fund (NAF) Employees

1. PURPOSE. To outline the responsibilities and procedures for administering the Workers' Compensation Program for NAF employees.

2. REFERENCE. AR 215-1, Chapter 14, Section XV

3. DISCUSSION

a. All Nonappropriated Fund Instrumentalities (NAFI's) are covered against claims resulting from on-the-job injuries through a self-insured workers' compensation program managed by the Army Central Insurance Fund (ACIF). Each activity pays a premium each year based upon the cost of operating the program. The program covers all civilian NAF employees. It does not cover off duty military.

b. Any civilian NAF employee injured on-the-job who receives medical attention and/or misses work due to an on-the-job injury may file a claim for reimbursement of medical expenses and/or lost salary.

c. Lost time and medical benefits will be provided through the claims service contractor (RSKCO) . If an employee is absent from work more than three days as a result of an on-the-job injury, they are eligible for compensation. Benefits are based on 2/3 of the employee's average weekly earnings, which has a minimum and maximum rate.

d. Regular full-time/part-time employees may be granted sick leave or leave without pay (LWOP), upon written request. Employees may request the temporary use of sick leave pending the receipt of Workers' Compensation Benefits, by completing Workers' Compensation Claim Benefit Options Form.

4. RESPONSIBILITY.

**a. Supervisors.** Supervisors are RESPONSIBLE for authorizing medical treatment for an employee injured on-the-job and for COMPLETING ALL FORMS associated with the injury. FAILURE TO REPORT A LOST TIME INJURY to the NAF HRO within eight (8) days from the date the supervisor had knowledge of the injury may result in a fine by the Department of Labor. The LS-202 MUST BE RECEIVED AT NAF-HRO WITHIN eight (8) days in order to ensure compliance.

b. Employees. Employees are responsible for immediately reporting an injury while on-the-job to their supervisor or someone in the supervisory chain, obtaining approval for treatment, initiating a claim for reimbursement of medical expenses and/or lost wages, and for obtaining and providing all medical certificates, bills, etc. to their supervisor or NAF Human Resource Office (HRO). If an employee desires temporary use of sick leave pending receipt of compensation benefits and/or to augment their benefits with sick leave, they must request it in writing by completing Workers' Compensation Claim Benefit Options Form and agree to reimburse the fund upon receipt of benefits for sick leave temporarily used.

c. Human Resource Office. The NAF-HRO will provide guidance and direction to supervisors and employees, process all completed claim forms, coordinate with the Department of Labor, RSKCO, our claims service contractor, Fort Monroe Safety Office, Occupational Health and maintain a file on all on-the-job injuries.

d. Time and Attendance Clerks. Time and Attendance Clerks, under direction of supervisor, are responsible for insuring that individuals injured on-the-job and drawing compensation benefits are reported on time and attendance cards in accordance with these instructions and Time and Attendance Reporting Procedures Users Manual.

## 5. General Guidance.

a. When a supervisor becomes aware that an employee has been injured he/she must determine whether the injury is an emergency (required attention to prevent loss of life or limb) or not. If it IS an emergency, the supervisor should call 911. If it IS NOT an emergency, the supervisor may either direct or recommend that the employee report to the clinic or to the individual's private physician. After normal duty hours the employee should be referred to off-post hospital or to their private physician.

b. LS 202, Employers First Report of Injury. When an employee is injured on the job, Form LS 202 is required within 8 days of the supervisor's or manager's knowledge of the injury and must be provided to the NAF HRO, or a penalty may be imposed by the Department of Labor.

c. LS-1, Request for Examination/Treatment of Injury. This form is given to the employee to take to the doctor or hospital, authorizing medical attention. Employees may go to a doctor of their choice or to one of the nearest military facilities. If there is no time to complete this form at the time of the injury, managers should follow up the next day and take the form to where the employee was treated. Upon completion of the form, the doctor's office or the hospital returns the form to personnel, who then takes appropriate action to distribute IAW AR 215-1

d. When the employee returns to work, complete Form LS-210, if the LS-202 did not show a return to work date. This form (LS-210) must be completed each pay period

the employee continues to be disabled from duty. If employee has had loss time, he/she must complete w/c claim benefit options form. This is necessary to insure that the employee does not receive both w/c benefits and sick leave.

e. Copies of ALL doctors' notes, sick leave slips, etc, must be sent to NAF HRO to be forwarded to RSKCO, our claims service contractor.

f. If the physician determines that the employee is not capable of returning to duty, find out whether the employee desires to be placed on sick leave or LWOP for the duration of the injury. The employee may wish to use sick leave temporarily, pending receipt of benefits. If employee will be incapacitated from duty for 3 days or less, no compensation will be paid. Sick leave provisions only apply to employees who earn sick leave.

g. If the employee has already obtained medical treatment, a physician's report MUST be provided to expedite the claim. Medical documentation to substantiate all claims is required. Determination is made by RSKCO.

h. If the employee desires to be placed on LWOP, the employee's time will be shown on the time card as absence without pay (AWOP) Code 4 (see paragraph 3-3 d (1), Time and Attendance Reporting Procedures Users Manual) for those hours he/she would normally be scheduled, and the employee will retain all payments received from workers' compensation.

i. If a regular full-time/part-time employee desires the use of sick leave, they must also request it, plus agree to pay back the temporary use of sick leave (see Workers' Compensation Claim Benefit Options Form). The temporary use of sick leave is only to be used to prevent a financial hardship to the employee when there may be a delay in receiving Workers' Compensation benefits. Normally an employee will receive his/her first benefit check within 4 days of the 1st day of disability.

j. If the employee was granted temporary use of sick leave, upon receipt of their compensation check they MUST take the check and check stub to NAF-HRO to buy back the temporary sick leave used. For the days that the employee was granted temporary use of sick leave, if approved, a corrected time card must be prepared after notification and forwarded to NAF Financial Services, P.O. Box 6111, Texarkana, Texas 75505-6111.

6. A copy of these instructions must be provided to each supervisor and attendance clerk. Any questions regarding these procedures should be directed to NAF-HRO Human Resources Assistant, 788-2045.

Donald Petrine  
Chief, NAF Human Resources  
Fort Monroe, VA

5 Encls

1. Responsibilities  
Time Card Reporting
2. Form LS-1
3. Form LS-202
4. Form LS-210
5. Workers' Compensation Benefit Claim Options Form

## ON-THE-JOB INJURIES

### RESPONSIBILITY OF EMPLOYEE

1. Immediately notify supervisor.
2. If medical treatment is required, obtain a COMPLETED Part A Form LS-1 from your supervisor and take to the off-post hospital or your physician. Inform hospital or physician that the incident is an on-the-job injury. The physician is to complete Part B of the LS-1. Contrary to instructions on the form, ask the physician to complete the form and return it to you or mail to your supervisor/facility technician at address shown in item 9, who will then forward to NAF-HRO.
3. If the physician determines you are unable to return to duty and does not complete the LS-1 form immediately, obtain a sick leave slip and turn it in immediately to your supervisor.
4. If further treatment is required after the physician completes the LS-1, obtain Form LS-204 from your supervisor, take it to the physician on your next visit, for completion, and return completed forms to your supervisor.
5. An employee may not change physicians after the initial choice unless prior consent for the change has been approved.
6. If you lose time from work, you must complete a Workers' Compensation (w/c) Claim Benefit Options Form. Loss time starts the day after the injury.
7. If you agreed to the temporary use of sick leave, when you receive your first w/c benefit check, you must take it to NAF-HRO, who will initiate action to re-credit your sick leave.
8. All medical bills should be forwarded to NAF-HRO to be sent to RSKCO, our claims service contractor, for payment.
9. If you are employed at a second job, you must notify NAF-HRO in order for you to be compensated, if approved.

### RESPONSIBILITY OF SUPERVISOR

1. Authorize medical treatment or examination, if necessary.
2. If it is an emergency, you should call 911 and have employee transported to the closest off base Hospital Emergency Room. An LS-1 will be required.
3. If it is a non-emergency, you may either direct or recommend that the injured employee report to Occupational Health or to the individual's private physician. After normal duty hours, refer employee to either off-post hospital or employee's private

physician. An LS-1 will be required for employee's private physician or off-post hospital.

4. Insure that injured employee receives the w/c pamphlet, which attempts to answer the questions most frequently asked when an on-the-job injury occurs.
5. Complete Part A of LS-1 per attached example and give to employee to take to the physician for completion. NOTE: There are two blocks in item 7 that can be checked. If you have reason to doubt the injury is job related, check the 2nd block.
6. Contrary to instructions, when the physician completes LS-1 and LS-204, have employee return it to their supervisor, who will forward to NAF-HRO.
7. Form LS-202, per attached example, must be completed and returned to NAF-HRO within eight (8) days from the time the supervisor first became aware of the accident. Failure to file the LS-202 within 10 days to Department of Labor will result in a 10% penalty based on the 1st payment of lost time benefits. Failure or refusal to file the LS-202 may result in a fine of \$10,000 levied by Department of Labor.
8. When the employee returns to work, complete Form LS-210 if the LS-202 did not show a return to work date. This form (LS-210) must be completed each pay period the employee continues to be disabled from duty. If employee has had loss time, he/she must complete w/c claim benefit options form. This is necessary to insure that the employee does not receive both w/c benefits and sick leave.
9. Copies of ALL doctors' notes, sick leave slips, etc. must be sent to NAF-CPO to be forwarded to RSKCO, our claims service contractor.

ON-THE-JOB INJURIES  
TIME CARD REPORTING

RESPONSIBILITY OF EMPLOYEE

1. Regular full-time/part-time employees may request temporary use of sick leave pending receipt of Workers' Compensation Benefits, but you must agree to pay back the temporary use of sick leave (See Workers' Compensation Claim Benefit Options Form). The temporary use of sick leave is only to be used to prevent a financial hardship to the employee when there may be a delay in receiving Workers' Compensation Benefits. Normally an employee will receive his/her first benefit check within 14 days of the 1st day of disability. You also have the choice of being put on leave without pay (LWOP) awaiting approval of Workers' Compensation Benefits. If you choose LWOP, you will receive no pay from the fund, but you may keep the check you receive from Workers' Compensation. You must advise your supervisor of your choice and sign the necessary form (Workers' Compensation Claim Benefit Options Form)

RESPONSIBILITY OF SUPERVISOR

1. Regular full-time/part-time employees will be carried on the time card as sick leave for the first three days of absence, after the day of the accident. There is a three-day waiting period commencing on the first day following the day of the injury. The employee signs the Workers' Compensation Claim Benefit Options Form agreeing to reimburse the fund if they receive Workers' Compensation Benefits.
2. If your employee desires to be carried as LWOP with no use of sick leave, the entire period of absence will be shown as absent without pay (AWOP) (Code 4).
3. Any lost time, over two hours, that is taken due to the injury, must be reported by completing LS-210 Form for each pay period.
4. Regular full-time/part-time employees WILL NOT be charged sick leave or LWOP on the day of the injury, even if they are sent home by the physician. If lost time occurs beyond the day of the accident, the employee is charged with the use of sick leave or LWOP, as requested.
5. Flexible employees WILL NOT be charged LWOP on the day of the injury, even if they are sent home by the physician. If lost time occurs beyond the day of the accident, the employee is charged with LWOP.